10219 Ruoff

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

BELLFLOWER # 0400
16600 CIVIC CENTER DRIVE
BELLFLOWER CA
PHONE: (310) 804-2588 EXT: #6249

BUILDING PERMIT
ALTERATION/REPAIR
BL 0400 9707030035

LEGAL ID:
TR: 22667 LT: 3 BL: .001

ASSESSOR INFORMATION NUMBER:
8152-007-027

TENANT:

OWNER: TEL. NO:
LOS ANGELES COUNTY CDC (213) 890-7063-

APPLICANT: TEL. NO:
SOUTHERN SUN CONSTRUCTION (714) 476-3133-

CONTRACTOR: TEL. NO:
SOUTHERN SUN CONSTRUCTION CO (714) 476-3133-
17775 MAIN STREET #B LIC. NO
IRVINE CA 92614 509306 B

ARCHITECT OR ENGINEER: TEL. NO:
LIC. NO:

MAP NO: SEWER MAP BOOK: PAGE: FIRE ZONE: CMP:
90H277 3 01

NO. OF FAMILIES: DWELLING UNITS: APT/COND: STAT CLASS:
YES 21

AIR QUALITY: SCHOOL WITHIN 1000 FEET: HAZARDOUS MATERIALS:
NO NO NO

REQUIRED SET BACK YARD: HWY: TOTAL SETBACK FROM PROP LINE: EXIST WIDTH:
FRONT PL-
SIDE PL-

	SQ. FT	NO. OF STORIES	CONST TYPE
STRUCTURE:			VN

EXIST BLDG USE: APART USE ZONE: R-3
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION: 64,000

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE			0.00
AC STRONG MOTION RESID	64000.00	VAL	0.00
A1 PLANCHECK W/EN-HC	64000.00	VAL	0.00
A2 PERMIT W/ENERGY-HC	64000.00	VAL	0.00
A6 PLAN MAINTENANCE FEE	64000.00	VAL	0.00
	TOTAL FEES		0.00

REPORT ID: DPR261 ROUTE TO: BS0400

BUILDING ADDRESS:
10219 RUOFF AV
WHIT CA 906041229
NEAREST CROSS STREET: MULBERRY
THOMAS PAGE: 707 GRID: E5 LOCALITY: WHITTIER

ISSUED ON: 07/03/97 PROCESSED BY: DY EXPIRES ON: 07/03/98

FINAL DATE 10/2/97 FINAL BY: CODE:

DESCRIPTION OF WORK
REPAIR INTERIOR FINISHES REPLACE FIXTURES

SPECIAL CONDITIONS:
ZERO FEE #B970206

APPROVALS	DATE	INSPECTOR SIGNATURE
LOCATION AND SETBACKS		
SOILS ENGINEER APPROVAL		
FOUNDATION/TRENCH FORMS		
SLAB/UNDER FLOOR		
RAISED FLOOR FRAMING		
UNDERFLOOR INSULATION		
FLOOR SHEATHING		
ROOF SHEATHING		
SHEAR PANELS		
FRAME INSPECTION		
FIRE SPRINKLER HANGERS		
INSULATION/WEATHER STRIP		
INTERIOR LATH/DRYWALL		
EXTERIOR LATH		
RATED FLOOR/CEIL ASSEM.		
RATED WALL ASSEMBLIES		
RATED SHAFTS/OPENINGS		
T-BAR CEILINGS		
LOT DRAINAGE		

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class B Lic. No. 509306

Contractor's Signature Date 7/2/97

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500).):

☐ I am exempt under Sec. _____ , B.& P.C. for this reason:

[Electrical, Plumbing & Sewer Permits Only]

☐ I, as owner of the property, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

[All Other Permits]

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☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

Owner Signature Date

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier Golden Eagle

Policy Number NWC 416681-01

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant Signature Date

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS ($100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself complied and will continue to comply therewith through the application process.

Applicant (Print Name) Applicant Signature

Company Name (if employed by an entity/agency) Date 7/2/97

JOB ADDRESS
LOCALITY

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist, I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature **Date** 7/2/97

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

BELLFLOWER # 0400
16600 CIVIC CENTER DRIVE
BELLFLOWER CA
PHONE: (310) 804-2588 EXT: #6249

ELECTRICAL PERMIT
EL 0400 9707030042

LEGAL ID:
TR: 22667 LT: 3 BL: .001

ASSESSOR INFORMATION NUMBER:
8152-007-027

TENANT:

OWNER: TEL. NO:
LOS ANGELES COUNTY CDC (213) 890-7063-

APPLICANT: TEL. NO:
SOUTHERN SUN CONSTRUCTION (714) 476-3133-

CONTRACTOR: TEL. NO:
SOUTHERN SUN CONSTRUCTION CO (714) 476-3133-
17775 MAIN STREET #B LIC. NO
IRVINE CA 92614 509306 B

ARCHITECT OR ENGINEER: TEL. NO:
LIC. NO:

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE			0.00
G1 OUTLETS-LGT,SW,RECP	75.00	OUT	0.00
G2 LIGHTING FIXTURES	35.00	LGT	0.00
H4 RES RANGE HDS LT 3HP	4.00	HOO	0.00
H7 RES EXHAUST FANS	4.00	EX	0.00
LA 100 AMP PANELS, MCC	5.00	PAN	0.00
LB 200 AMP PANELS, MCC	5.00	PAN	0.00
TOTAL FEES			0.00

REPORT ID: DPR265 ROUTE TO: BS0400

BUILDING ADDRESS:
10219 RUOFF AV
WHIT CA 906041229
NEAREST CROSS STREET: MULBERRY
THOMAS PAGE: 707 GRID: E5 LOCALITY: WHITTIER

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
07/03/97	DY		07/03/98

FINAL DATE 10/21/97 FINAL BY: CODE:

DESCRIPTION OF WORK
REPLACE APPLIANCES, RE-WIRING, UPGRADE SVC PANEL

SPECIAL CONDITIONS:
Zero fee #B970206

APPROVALS	DATE	INSPECTOR SIGNATURE
TEMPORARY POWER POLE		
UNDERGROUND CONDUIT		
UFER GROUND		
ROUGH CONDUIT		
ROUGH WIRING		
MAIN WATER LINE PLASTIC Y/N METAL Y/N		
UTILITY COMPANY NOTIFIED		

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class B Lic. No. 509306

Contractor's Signature Date 7/2/97

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☐ I am exempt under Sec. _____ , B.& P.C. for this reason:

[Electrical, Plumbing & Sewer Permits Only]

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[All Other Permits]

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Owner Signature Date

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier Golden Eagle

Policy Number NWC 416681-01

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant Signature Date

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LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself complied and will continue to comply therewith through the application process.

Applicant (Print Name) Applicant Signature

Company Name (if employed by an entity/agency) Date 7/2/97

JOB ADDRESS
LOCALITY

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Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist, I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

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Applicant or Agent Signature **Date** 7/2/97

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

BELLFLOWER # 0400
16600 CIVIC CENTER DRIVE
BELLFLOWER CA
PHONE: (310) 804-2588 EXT: #6249

PLUMBING PERMIT
PL 0400 9707030029

LEGAL ID:
TR: 22667 LT: 3 BL: .001

ASSESSOR INFORMATION NUMBER:
8152-007-027

TENANT:

OWNER: TEL. NO:
LOS ANGELES COUNTY CDC (213) 890-7063-

APPLICANT: TEL. NO:
SOUTHERN SUN CONSTRUCTION (714) 476-3133-

CONTRACTOR: TEL. NO:
SOUTHERN SUN CONSTRUCTION CO (714) 476-3133-
17775 MAIN STREET #B LIC. NO
IRVINE CA 92614 509306 B

ARCHITECT OR ENGINEER: TEL. NO:
-
LIC. NO:

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE			0.00
07 BATHTUBS/SHOWERS	4.00	FIX	0.00
21 HOSE BIBB(S)	3.00	FIX	0.00
25 LAVATORIES / SINKS	9.00	FIX	0.00
27 PRESS REG DEVICE(S)	2.00	DEV	0.00
45 WATER CLOSET/URINAL	4.00	FIX	0.00
47 WATER HEATER(S)	1.00	WTH	0.00
51 LOW PRS GAS LE5 OUTS	1.00	SYS	0.00
TOTAL FEES			0.00

REPORT ID: DPR263 ROUTE TO: BS0400

BUILDING ADDRESS:
10219 RUOFF AV
WHIT CA 906041229
NEAREST CROSS STREET: MULBERRY
THOMAS PAGE: 707 GRID: E5 LOCALITY: WHITTIER

ISSUED ON: PROCESSED BY: PLAN BY: EXPIRES ON:
07/03/97 DY 07/03/98

FINAL DATE FINAL BY: CODE:
10/21/97

DESCRIPTION OF WORK
REPLACE FIXTURES

SPECIAL CONDITIONS:
zero fee #B 970206

APPROVALS	DATE	INSPECTOR SIGNATURE
UNDER SLAB WORK		
WATER SERVICE PLASTIC Y/N METAL Y/N		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
LAWN SPRINKLERS		
GAS TEST		
UTILITY COMPANY NOTIFIED		
CWV		
GRAY WATER SYSTEM		

LICENSED CONTRACTOR'S DECLARATION

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[Electrical, Plumbing & Sewer Permits Only]

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[All Other Permits]

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Carrier Golden Eagle

Policy Number NWC 416681-01

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Applicant (Print Name) _____ Applicant Signature _____

Company Name (if employed by an entity/agency) _____ Date 7/2/97

JOB ADDRESS
LOCALITY

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Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

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Applicant or Agent Signature _____ **Date** 7/2/97

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

BELLFLOWER # 0400
16600 CIVIC CENTER DRIVE
BELLFLOWER CA
PHONE: (310) 804-2588 EXT: #6249

MECHANICAL PERMIT
ME 0400 9707030038

LEGAL ID:
TR: 22667 LT: 3 BL: .001

ASSESSOR INFORMATION NUMBER:
8152-007-027

TENANT:

OWNER: TEL. NO:
LOS ANGELES COUNTY CDC (213) 890-7063-

APPLICANT: TEL. NO:
SOUTHERN SUN CONSTRUCTION (714) 476-3133-

CONTRACTOR: TEL. NO:
SOUTHERN SUN CONSTRUCTION CO (714) 476-3133-
17775 MAIN STREET #B LIC. NO
IRVINE CA 92614 509306 B

ARCHITECT OR ENGINEER: TEL. NO:
LIC. NO:

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE			0.00
08 FURNACE/HEATER < 100	20.00	UNI	0.00
30 AIR INLETS/OUTLETS	30.00	IN/	0.00
TOTAL FEES			0.00

REPORT ID: DPR264 ROUTE TO: BS0400

BUILDING ADDRESS:
10219 RUOFF AV
WHIT CA 906041229
NEAREST CROSS STREET: MULBERRY
THOMAS PAGE: 707 GRID: E5 LOCALITY: WHITTIER

ISSUED ON: 07/03/97 PROCESSED BY: DY PLAN BY: EXPIRES ON: 07/03/98

FINAL DATE 10/21/97 FINAL BY: CODE:

DESCRIPTION OF WORK
REPLACE FIXTURES

SPECIAL CONDITIONS:
zero fee #B 970206

APPROVALS	DATE	INSPECTOR SIGNATURE
FAU/WALL FURNACE		
COMBUSTION AIR OPENINGS		
DUCT WORK		
AC/COMPRESSOR		
THERMOSTAT		
FIRE DAMPERS		
SMOKE DETECTION DEVICES		
COMMERCIAL HOOD		

LICENSED CONTRACTOR'S DECLARATION

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License Class B Lic. No. 509306

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_____

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☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

Owner Signature _____ Date _____

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier Golden Eagle

Policy Number NWC 416681-01

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant Signature _____ Date _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS ($100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself complied and will continue to comply therewith through the application process.

Applicant (Print Name) _____ Applicant Signature _____

Company Name (if employed by an entity/agency) _____ Date 7/2/97

JOB ADDRESS
LOCALITY

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist, I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature _____ **Date** 7/2/97